MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

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	SERIAL NO.	FILING DATE
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	APPLICANT(S)	

CLAIMS

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TOTAL CLAIMS	30	MAKA		经生物		

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DEP.	<u> </u>	art comment	<u> </u>	Insequents		ECOMPOSES
TOTAL CLAIMS	<u> </u>					171,2

*MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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